



**Helping Families Initiative**  
Morgan County Courthouse  
302 Lee Street, N.E.  
POB 1727  
Decatur, Alabama 35602

**SCOTT ANDERSON**  
DISTRICT ATTORNEY  
8TH JUDICIAL CIRCUIT OF ALABAMA  
MORGAN COUNTY

Rebecca L. Bearden  
Director

Office (256) 351-4610  
Cellular (256) 556-0079

[beckybearden@hfialabama.com](mailto:beckybearden@hfialabama.com)  
[www.morgancountyda.com](http://www.morgancountyda.com)

**REFERRAL FORM**

Date:

*Please email this form and the complete student profile to: [beckybearden@hfialabama.com](mailto:beckybearden@hfialabama.com).*

Child's Name:

Child's School:

Child's Date of Birth:  Child's Grade:

Custodian's Name:  Relationship to Child:

Home Phone(s):  Cell Phone(s):

Street Address:

City:  State: AL Zip:

REASON FOR REFERRAL:  Behavior and Truancy  Behavior  Other

Does this student have an IEP and/or 504?  Yes  No (If yes, check all that apply)  
 Specific Learning Disability  Mental/Emotional Issue(s)  Vision Impaired  504  
 Other Health Impairment: \_\_\_\_\_

**Indicate Intervention(s) already attempted by school and outcome(s) (Parent Contact, etc.):**  
(USE ADDITIONAL SHEETS IF NECESSARY)

**Description of Presenting Problem** (USE ADDITIONAL SHEETS IF NECESSARY)

Person Making Referral:  Contact Number:

Occupation and School/Agency:



**Helping Families Initiative**

Morgan County Courthouse  
302 Lee Street, N.E.  
POB 1727  
Decatur, Alabama 35602

Office (256) 351-4610  
Cellular (256) 556-0079

**SCOTT ANDERSON**  
DISTRICT ATTORNEY  
8TH JUDICIAL CIRCUIT OF ALABAMA  
MORGAN COUNTY

Rebecca L. Bearden  
Director

[beckybearden@hfiAlabama.com](mailto:beckybearden@hfiAlabama.com)  
[www.morgancountyda.com](http://www.morgancountyda.com)

Person Making Referral:

Contact Number:

Occupation and School/Agency:

Rcd. \_\_\_\_\_/b.

Rev.MCDA.HFI Referral.Fill-in..10.18.23